

FIG. 1

FIG. 2

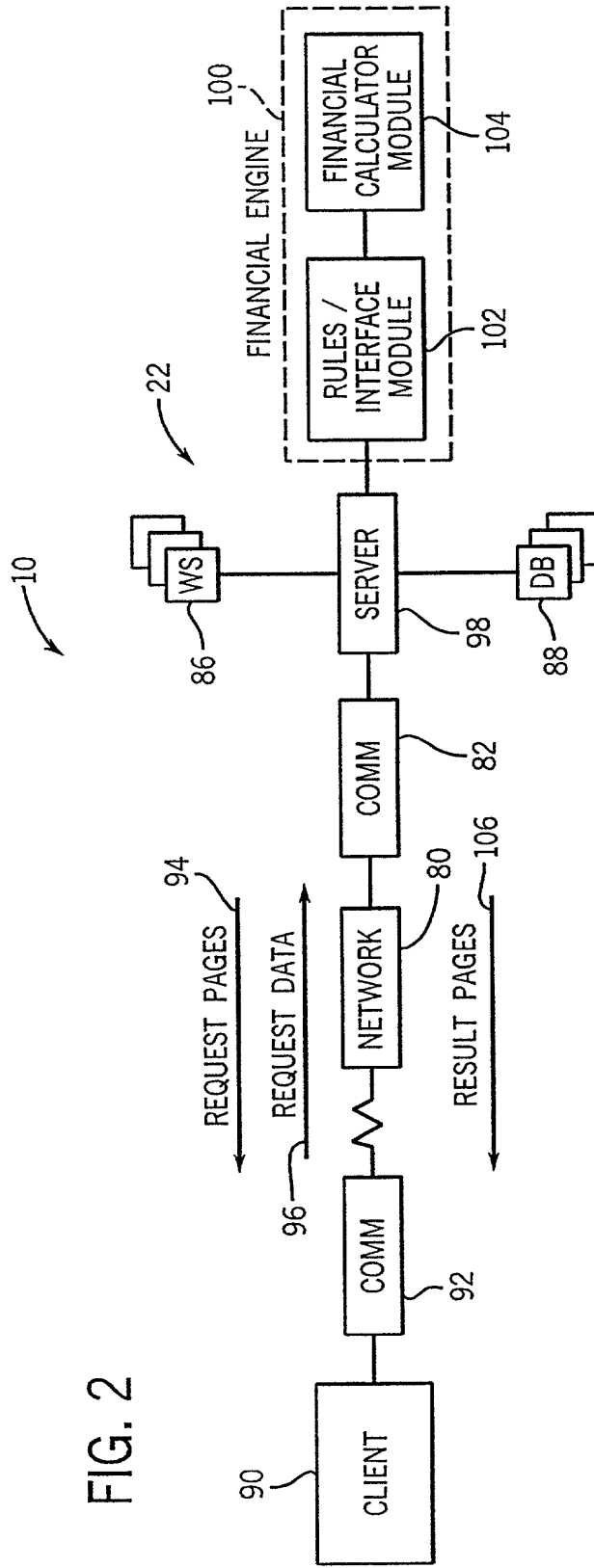
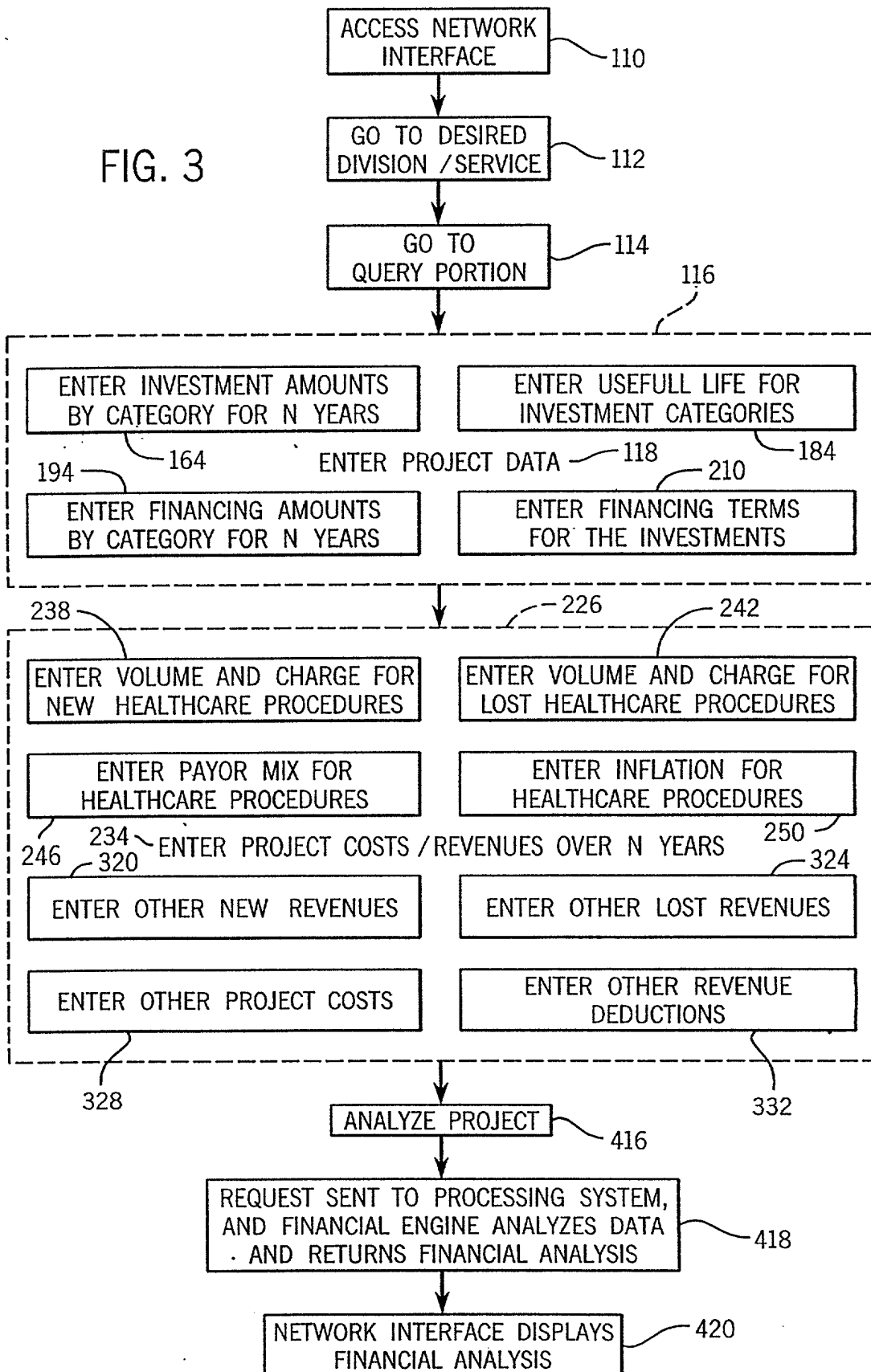


FIG. 3



128 124 122 120 126

TM COMPANY NAME SERVICE 130

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PROJECT INFORMATION: 132 140 ~ YOUR ROLE: ROLE 1 134

144 ENTITY / DEPT.: ENTITY 1 138 ~ PROJECT NAME: PROJECT 1 142

160 PROJECTED START DATE: MONTH 156 ~ SALES TAX (%) ST1 136

162 INTERNAL DISCOUNT RATE (%) IDR1 152 ~ PROPERTY TAX (%) PT1 148

166 INVESTMENT AMTS: YR.0 YR.1 YR.2 YR.3 YR.4 YR.5 168

NEW CONSTRUCTION V1-0 V1-1 V1-2 V1-3 V1-4 V1-5 170

RENOVATION ~172 V2-0 V2-1 V2-2 V2-3 V2-4 V2-5

EQUIPMENT ~174 V3-0 V3-1 V3-2 V3-3 V3-4 V3-5

INVESTMENT #4 V4-0 V4-1 V4-2 V4-3 V4-4 V4-5

INVESTMENT #N VN-0 VN-1 VN-2 VN-3 VN-4 VN-5

182 TOTAL ~178 TOT0 TOT1 TOT2 TOT3 TOT4 TOT5 176

ONGOING CAP. NEEDS VAL0 VAL1 VAL2 VAL3 VAL4 VAL5 176

190 USEFUL LIFE FOR EACH INVESTMENT: INV-CATEGORY 188 YEARS 180

192 FINANCING AMOUNTS: (\$) 208 FINANCING TERMS: 212 186

NEW CONSTRUCTION 196 FIN1 INTEREST RATE (%) T1 214

170 RENOVATION ~172 198 FIN2 TIME PERIOD (MONTHS) T2 218

EQUIPMENT ~174 200 FIN3 TERM #3 224 T3 218

INVESTMENT #4 202 FIN4 TERM #4 216 T4 218

INVESTMENT #N 204 FINN TERM #N TN 220

178 TOTAL 206 TOT-FIN

IMPACT ON HEALTHCARE REVENUES 228

FIG. 4

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128 (TM) COMPANY NAME 122
126 SERVICE 130

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NEW HEALTHCARE PROCEDURES: DESCRIPTION 1 252

236 PROJ. VOLUME 254	YR.1	YR.2	YR.3	YR.4	YR.5
INPATIENT 262	VOL1A	VOL2A	VOL3A	VOL4A	VOL5A
OUTPATIENT 264	VOL1B	VOL2B	VOL3B	VOL4B	VOL5B

256 CHARGE (\$) PER PROCEDURE:

INPATIENT 266	I-CHG 270	ADD ANOTHER NEW HEALTHCARE PROCEDURE 258
OUTPATIENT 268	O-CHG 272	

240 LOST HEALTHCARE PROCEDURES: DESCRIPTION 2 274

276 PROJ. VOLUME 280	YR.1	YR.2	YR.3	YR.4	YR.5
INPATIENT 280	LV1A	LV2A	LV3A	LV4A	LV5A
OUTPATIENT 282	LV1B	LV2B	LV3B	LV4B	LV5B

284 CHARGE (\$) PER PROCEDURE:

INPATIENT 286	LOST-IC 290	ADD ANOTHER LOST HEALTHCARE PROCEDURE 294
OUTPATIENT 288	LOST-OC 292	

244 PAYOR MIX:

INPATIENT: 298	YR.1	YR.2	YR.3	YR.4	YR.5
PAYOR #1	V1-1	V1-2	V1-3	V1-4	V1-5
PAYOR #N	VN-1	VN-2	VN-3	VN-4	VN-5
300 TOTAL 302	TOT1	TOT2	TOT-3	TOT4	TOT5

OUTPATIENT:

YR.1	YR.2	YR.3	YR.4	YR.5
PAYOR #1	V1-1	V1-2	V1-3	V1-4
PAYOR #N	VN-1	VN-2	VN-3	VN-4
248 TOTAL 306	TOT1	TOT2	TOT-3	TOT5

248 HEALTHCARE INFLATION:

310	YR.1	YR.2	YR.3	YR.4	YR.5
INPATIENT	I1-1	I1-2	I1-3	I1-4	I1-5
OUTPATIENT	I2-1	I2-2	I2-3	I2-4	I2-5

314 CONTINUE
BACK 316

FIG. 5

124

232

128 (TM) COMPANY NAME 122

126 SERVICE 130

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OTHER NEW REVENUES: DESCRIPTION 1 334

318 YR.1 REV1 YR.2 REV2 YR.3 REV3 YR.4 REV4 YR.5 REV5

336 338 340 342 344

ADD ANOTHER NEW REVENUE SOURCE 346

322 OTHER LOST REVENUES: DESCRIPTION 2 348

YR.1 LREV1 YR.2 LREV2 YR.3 LREV3 YR.4 LREV4 YR.5 LREV5

350 352 354 356 358

ADD ANOTHER LOST REVENUE SOURCE 360

326 OTHER COSTS OF PROJECT: DESCRIPTION 3 362

364 CODE #: VAL1 366 VARIABLE AND /OR FIXED: COST-TYPE1 370

VARIABLE COST VAL2 PER VARI 368

372 FIXED COST 374 VAL3 PER PERIOD 1 376

378 380 382

INFLATION OF COSTS (%):

384 YR.1 INF1 YR.2 INF2 YR.3 INF3 YR.4 INF4 YR.5 INF5

386 388 390 392 394

ADD ANOTHER PROJECT COST 396

330 OTHER DEDUCTIONS FROM REVENUE:

DEDUCT	% REVENUE
CHARITY 398	DEDUCT 1 402
BAD DEBT 400	DEDUCT 2 404
DEDUCTION #3	DEDUCT 3 406
DEDUCTION #N	DEDUCT N 408

412 BACK 414 ANALYZE PROJECT 410 RESET

FIG. 6